OFFICIAL FILE ILLINOIS COMMERCE COMMISSION RMAL COMPLAINT

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701

For Commission Use Only:	
Case: 060183	

ORIGINAL

Regarding a complaint by (Person making the complaint): Glenwood Associates/Wald Ma	nagement Co., Inc.
Against (Utility name): People's Energy Has Light of Cake Con	upany
As to (Reason for complaint) Incorrect direction for transferring gas mete	ars
in <u>Chicago</u> Illinois.	COMPTERC 2006 MAR
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:	ERK'S
My mailing address is 2052 W. Irving Park Road Chicago, IL 60618	10 S
The service address that am complaining about is 6424-30 N. Glenwood Chicago, IL6	0FF10E
My home telephone is [_773 _] 929-7000	
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [773] 929-7000 (Full name of utility company) People's Energy Corp. (at the provisions of the Illinois Public Utilities Act. In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is in the space below.	respondent) is a public utility and is subject wolved with your complaint.
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complain Has your complaint filed with that office been closed?	nt? Yes No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.
see attached
Please clearly state what you want the Commission to do in this case:
 Create a correct set of insturctions for condominium gas trasfers Remove all fines for the Glenwood Condominium Assn. related to this complaint and require People's Energy to reimburse Glenwood Condo Assn for the extra laobr involved.
meter transfer.
Date: S/1/06 Complainant's Signature
(Month, day, year) WALD MANAGEMENT CO. INC
If an attorney will represent you, please give the attorney's name, address, and telephone number.
You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).
Tour need to the the drighter with the bolining and. Also, provide the cupy for each utility complained about (1 etc.) on as 1 espainteness.
VERIFICATION
A notary public must witness the completion of this part of the form.
Brance I Mills
I
(Signature)
Subscribed and sworn/affirmed to before me on (month, day, year) Trush 1, 2006

Notery Public, Illinois

OFFICIAL SEAL NNA M CAVANAUG

NOTARY PUBLIC, STATE OF ILLINOIS S MY COMMISSION EXPIRES: 03/24/06

NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.